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Ľ	IULTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT					┪	HOF	1 700=	
* If the difference in column 1 is less than zero, enter						column 2	' [+135=		OF	+270=	
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL ADDIT FEE										OR	+270=	
!	the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	d For IN THIS	SPACE IS IN	ss than	20, enter "20."		TOTAL IT. FEE		OR A	TOTAL DDIT. FEE	